

## DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below at 201 et seq. underneath my name.

Ibelieve I am the original, first and sole inventor if only one name is listed at 201 below, or an original, first and joint inventor if plural names are listed at 201 ct below, of the subject matter which is claimed and for which a patent is sought on the invention entitled METHOD AND APPARATUS FOR ACCESS ELECTRONIC DATA VIA A FAMILIAR PRINTED MEDIUM, the specification of which:

is attached hereto X was filed on May 25, 1994 as Application Serial No. 08/250799 (for declaration not accompanying application)

with amendment(s) filed (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referr above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulat §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119/§172 of any foreign application(s) for patent or inventor's certificate listed be and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claim

APPLICATION NUMBER	COUNTRY	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 U.S.C. 119/172	
			YES D	NO 🗆
			YES O	ио п
			YES O	ио п
			YES O	№ П

I hereby claim the benefit under Title 35. United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date prior application and the national or PCT international filing date of this application:

	FILING DATE	STATUS			
APPLICATION SERIAL NO.		PATENTED	PENDING	ABANDONED	

POWER OF ATTORNEY: As a named inventor, I hereby appoint John F. Ward (Reg. No. 33,811) and John W. Olivo, Jr. (Reg. No. 35,634), whose address is & Olivo, 708 Third Avenue, New York, New York 10017, and each of them, my attorneys, to prosecute this application, and to transact all business in the and Trademark Office connected therewith.

 $t \mu$ 

# 27

6 3. 3

SEN	D CORRESPONDENCE	TO: WARD & OLIVO 708 THIRD AVENUE NEW YORK, NEW YORK 100	WARD	T TELEPHONE & OLIVO 597-6262	E CALLS TO:		
2 0 1 2 0 2 2 0 3	FULL NAME	LAST NAME RATHUS	PRST NAME SPENCER		A.		
	OF INVENTOR RESIDENCE &	GIY SHORT HILLS	YTY STATE OR POKEGON COUNTRY		COUNTRY OF CITIZENSIUF UNITED STATES OF AMERICA		
	POST OFFICE	POST OFFICE ADDRESS 31 KNOLLWOOD ROAD	SHORT HILLS	i	STATE OR COUNTRY NEW JERSEY	27P CODE 07078	
	ADDRESS FULL NAME	LAST NAME NEVID	FIRST NAME JEFFREY	1	MIDDLE NAME S.	· 	
	OF INVENTOR  RESIDENCE &	CITY NEW YORK	STATE OR FOREIGH COUNTRY NEW YORK		COUNTRY OF CHIZZENSIEF UNITED STATES OF AMERICA		4
	POST OFFICE	POST OFFICE ADDRESS 382 CENTRAL PARK WEST, #11D	OTY NEW YORK		STATE OR COUNTRY NEW YORK	22P CODE 10025	
	ADDRESS FULL NAME	LAST NAME FICHNER-RATHUS	FIRST NAME LOIS		MIDDLE NAME		
	OF INVENTOR RESIDENCE &	ary SHORT HILL	STATE OR FOREIGN COUNTRY NEW JERSEY		COUNTRY OF CITIZENSUS UNITED STATES OF AME		A
	CITIZENSHIP POST OFFICE	POST OFFICE ADDRESS 31 KNOLLWOOD ROAD	arr SHORT HILLS		STATE OR COUNTRY NEW JERSEY	21° CODE 07078	
2 0 4	ADDRESS FULL NAME	LAST NAME	PIRST NAME		MIDULE NAME		
	OF INVENTOR RESIDENCE &	απ	STATE OR FOREIGN COUNTRY		COUNTRY OF CITIZENSIBP		
	CITIZENSHIP POST OFFICE	POST OFFICE ADDRESS	arr		STATE OR COUNTRY	ZII¹ COD€	
	ADDRESS FULL NAME	LAST NAME	FIRST NAME -		MIDDLE NAME		
	OF INVENTOR  RESIDENCE &	ату	STATE OR FORLION COUNTRY		COUNTRY OF CITIZENSUIP		
	CITIZENSHIP POST OFFICE	POST OFFICE ADDRESS	arr		STATE OF COUNTRY	ZZP CODE	
2 0 6	ADDRESS FULL NAME	LAST NAME	FIRST NAME		MIDDLE NAME		
	OF INVENTOR	απ	STATE OR FOREIGN COUNTRY		COUNTRY OF CITIZENSIES		-
	RESIDENCE & CITIZENSHIP	POST OFFICE ADDRESS	ατγ		STATE OR COUNTRY	ZIF CODE	
	POST OFFICE ADDRESS						

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon

SIGNATURE OF INVENTOR 201  DATE  SIGNATURE OF INVENTOR 201	DATE 11/7/1/94	DATE 6/23/94
SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206
DATE	DATE	DATE